. •									Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECOR Effective October 1, 2000									09/839074					
. CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	ENTITY	τ .)R	OTHER		
TOTAL CLAIMS			20	<u> </u>			l	RATE	FE	E	. [RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FI	EE 355.	.00	OR	Basic Fee	710.00	
TOTAL CHARGEABLE CLAIMS			20 minus 20=		. 0			X\$ 9=	0	d	OR	. X\$18=		
INDEPENDENT CLAIMS			≥ minus 3 =		· 0			X40=	10) DR	X80-		
MULTIPLE DEPENDENT CLAIM PRESENT								+135=	1	7)R	+270=		
·If	the difference	in column 1 is	less than ze	an zero, enter "0" in column 2				TOTAL	120	<u> </u>	''' 28	TOTAL		
CLAIMS AS AMENDED - PART II									. تحت	٦٦,	<i>-</i>	OTHER	THAN	
(Column 1) (Column 2) (Column 3)							<u>.</u>	SMALI	L ENTIT	Y _O	R	SMALL		
AMENDMENTA		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	BER OUSLY	PRESENT EXTRA		RATE	ADI TION FEI	AL		RATE	ADDI- TIONAL FEE	
	Total	cane	Minus	**		e		X\$ 9=	Y^-	\Box_{c})R	X\$18=		
	Independent	· 900.	Minus	***		=		X40/	1)R	X80=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								125	1	- `		+270=		
								+135=		—╣゙	R	+270=		
10/10/05								ADDIT. FE			DR .	ADDIT. FEE		
· 'Y // U) (Column 1) (Column 2) (Column 3)														
AMENOMENT B		REMAINING AFTER AMENDMENT		NUM PREVI	BER	PRESENT EXTRA		RATE	TION FE	AL		RATE	ADDI- TIONAL FEE	
	Total	· W	Minus	••	<u> 20</u>	=]	X\$ 9=		c)R	X\$18=	, .	
	Independent	3	Minus	***	3	<u> - </u>	 	X40=		\Box_{c})R	X80=		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=)R	+270=		
·								TOTA ADDIT. FE	E	□۰)R	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)														
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NÚM	OUSLY	PRESENT EXTRA		RATE	ADD TION FEE	AL		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	••		3		X\$ 9=)R	X\$18=		
	independent	•	Minus	***		•]	X40=	T	ᅱ`		X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+	\dashv	P			
+135= OR +270=														
"If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEEOR														
.,,		mber Previously Pa iber Previously Pai					er tou	nd in the a	ppropriat	e box in				